

THOMAS DASCHLE
SOUTH DAKOTA

COMMITTEES:
AGRICULTURE
FINANCE
RULES AND ADMINISTRATION
(202) 224-2321
TOLL FREE 1-800-424-9094
<http://daschle.senate.gov>

United States Senate
WASHINGTON, DC 20510-4103

320 SOUTH FIRST STREET, SUITE 101
ABERDEEN, SD 57402
(605) 225-8823

1313 WEST MAIN STREET
RAPID CITY, SD 57702
(605) 348-7551

320 NORTH MAIN AVENUE, SUITE B
SIOUX FALLS, SD 57101
(605) 334-9596
TDD (605) 334-4632

March 5, 2003

The Honorable Donald Rumsfeld
Secretary
U.S. Department of Defense
The Pentagon
Washington, DC 20301

Dear Mr. Secretary:

You may have noticed a front-page news story that caught my eye yesterday morning: "Called-Up Reservists Take Big Hit in Wallet." The article identifies a growing problem on the home front – households that lose substantial income and benefits when a Guard member leaves a private-sector job to serve full-time in the military. Although I would like to pursue this more broadly, for now I write to request your assistance with just a single aspect – shortcomings in the health care coverage being provided to families of certain mobilized Guard personnel.

In many states, and perhaps across the country, Army Guard personnel are being told that their families cannot enroll in the same health plan as the families of regular active-duty soldiers. Although I have received varied explanations of the root cause, there are indications that this does not stem from a conscious policy decision, but may instead represent a glitch in the Army's personnel system. So far, we have reports of the problem affecting Guard units in South Dakota, North Dakota, Iowa, Utah, and Oregon. As you know, these states are among those exerting the highest effort per capita in the nationwide call-up of reserve personnel.

The affected families are prevented from enrolling in the military health plan known as TRICARE Prime Remote and instead are forced into TRICARE Standard. The former plan allows them to receive care with no premium and no cost-sharing when seeing an authorized provider; the latter charges an annual deductible of up to \$300 per family, as well as a 20 percent copayment for outpatient care. The only exception occurs for Guard families who live within 50 miles of a military base, which qualifies them for TRICARE Prime, which, like Prime Remote, requires no premium or cost-sharing. Unfortunately, in states with a large land area and few military facilities, this can leave a large proportion of Guard dependents in a second-rate health plan. South Dakota, for instance, has just one military base, with 90 percent of its total land area and more than 80 percent of its population outside the 50-mile zone.

This situation has caused a number of logic-defying disparities. For example, on no basis other than geography, some Guard families are in TRICARE Prime while others are in TRICARE Standard. We have also been told that the Guard's health-coverage system, designed by someone familiar with Air Guard operations, causes problems only for Army Guard families, but not for Air Guard families. But the most shocking example affects certain full-time Guard soldiers, known as AGRs, whose families are reassigned to a *lower* level of coverage when the Guard member is mobilized. Prior to mobilization, these families were covered under TRICARE Prime Remote, but when the Guard members recently were sent to Ft. Carson, Colorado, for

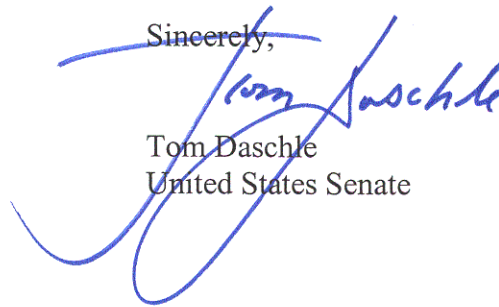
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mobilization, the system deemed their dependents ineligible for Prime Remote and forced them into Standard. Surely no one would argue that any of these discrepancies are intentional, practical, or fair, and I feel strongly that they must end. The best, most equitable solution would be to enroll all these Army Guard families in TRICARE Prime Remote.

Despite dozens of conversations involving my staff, the South Dakota National Guard, the North Dakota National Guard, the Army, TRICARE Management Activity, and TRICARE Central Region, I remain uncertain about the specific causes of the problem, how many Guard dependents are affected, and whether a solution is forthcoming. I would appreciate your assistance in answering these questions as soon as possible.

Mr. Secretary, we have called these Guard personnel to active-duty service on behalf of their country, with all the sacrifices and risks that entails, and they have not hesitated to respond. Our nation's leaders should be no less responsive in addressing the shortcomings of a system that has saddled their families with inferior health coverage. Thank you for your attention to this matter, and please know that I stand ready to assist as needed.

Sincerely,

A handwritten signature in blue ink, appearing to read "Tom Daschle", is written over the typed name and title. The signature is stylized with a large, sweeping loop at the end.

Tom Daschle
United States Senate